| JUL 1 5 2005 E. | rerenns a | U.S. Pater | nt and Trad | PTO/SB/21 (04-04) pproved for use through 07/31/2006. OMB 0651-0031 demark Office; U.S. DEPARTMENT OF COMMERCE mation unless it displays a valid OMB control number. | | |
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| ADEMARY | persons a. | Application Number | 09/922, | | | |
| TRANSMITTAL | t | Filing Date | Aug 3, | · | | |
| FORM | | First Named Inventor | Brother | | | |
| (to be used for all correspondence after initial filing) | | Art Unit | 2145 | | | |
| | - ⊦ | Examiner Name | Tanim | M. Hossain | | |
| Total Number of Pages in This Submission | 30 | Attorney Docket Number | IMTK:1 | | | |
| | | LOSURES (Check all tha | =4 cnn/s | | | |
| X Fee Transmittal Form Fee Attached X Amendment / Reply After Final Affidavits/declaration(s) X Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application | | Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Add Terminal Disclaimer Request for Refund CD, Number of CD(s) | | After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter X Other Enclosure(s) (please identify below): Credit Card Authorization; Post Card | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | ATURE (| OF APPLICANT, ATTORN | FY. OF | AGENT | | |
| Firm or Individual name Signature Daniel J. Chalker Chalker Flores, LP | | | | | | |
| Date July 11, 2005 | | | | | | |
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| | | CATE OF TRANSMISSION | | | | |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | | | | |

Typed or printed name Daniel J. Chaiker, Reg. No. Date July 11, 2005 Signature

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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE k Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number BADEMAR Complete if Known Effective on 12/08/2004. suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 09/922,209 TRANSMIT Filing Date Aug. 3, 2001 For FY 2005 First Named Inventor **Brothers Examiner Name** Tanim M. Hossain Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2145 TOTAL AMOUNT OF PAYMENT (\$) 225.00 IMTK:1004 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES SEARCH FEES Small Entity Small Entity** Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 500 200 Utility 150 100 250 200 100 130 Design 100 50 65 Plant 200 160 100 300 150 80 Reissue 300 150 500 250 600 300 200 Provisional 100 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description 50 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) 180 Multiple dependent claims 360 **Total Claims** Multiple Dependent Claims **Extra Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Two Month Extension of Time 225.00

| SUBMITTED BY | | 1 | 11 | | |
|-------------------|------------------|-------|----|---|------------------------|
| Signature | Shal | 11/h. | M | Registration No. (Attorney/Agent) 40,552 | Telephone 214-866-0001 |
| Name (Print/Type) | Daniel J. Chalke | | | | Date 7/11/05 |

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